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ABSTRACT

This report details the early care and education strategic plan for the District of Columbia. Following an executive summary, the report provides the rationale for developing an early care and education strategic plan and describes the process used to develop the plan. The top 10 early care and education issues in the district are then delineated and drafts of the vision and mission statements are presented. The proposed goal statements for the plan follow. The report then presents the citywide strategic plan--known as the Safe Passages program--as focusing on five major areas: (1) building and sustaining healthy neighborhoods; (2) assuring economic development; (3) making government work; (4) improving democratic practices in the district; and (5) ensuring that families, youth, and individuals are healthy and productive. The report next delineates selected goals and objectives of the Safe Passage Program as they relate to early care and education and early child development. It also provides an update on progress in meeting short-term objectives for early care and education in the district. The next steps in the strategic planning process are then delineated. The report concludes with a list of participants in the strategic planning process. (Contains a 16-item selected bibliography.) (KB)

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District of Columbia Early Care and Education Strategic Plan

August 2001

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Prepared for
Department of Human Services
Office of Early Childhood Development

Prepared by
University of the District of Columbia
Center for Applied Research and Urban Policy

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Printed under the Child Care and Development Fund (CCDF), Administration for Children and Families (ACF), U.S. Department of Health and Human Services.

Center for Applied Research and Urban Policy

The Center for Applied Research and Urban Policy (CARUP) was established in 1984. The Center conducts research on problems that affect the social, economic, physical, and biological health of urban areas, with a special focus on the District of Columbia. It provides technical assistance to urban managers and policy-makers. Special emphasis is placed on interdisciplinary approaches to problem solving.

CARUP recognizes that strong linkages between the university community, policy groups, and the local government are critical for developing research priorities and strategies that must take into consideration the needs identified by all those who have a stake in the District of Columbia and its residents. In order to effectively achieve a strong working relationship, the Center works to develop systematic linkages between appropriate government agencies and the university so that each is familiar with the other in terms of needs, capabilities, and resources.

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FOREWORD

I believe that you can judge a jurisdiction or government by the level of care and support it gives its most vulnerable citizens - its infants, toddlers, and school-age children. I am delighted that the District of Columbia government remains committed to giving children, a fair and better start in life.

The citizens also reaffirmed their support for children-first policies during the Mayor's Citizen Summit in November 2000. Nearly two of every five citizen chose strengthening children, youth, families, and individuals as the number one priority for the District government. We cannot fail our citizens.

The Office of Early Childhood and Development (OECD) under the leadership of Barbara Ferguson Kamara is coordinating citywide efforts to ensure that our children not only meet age-appropriate development milestones but also are ready to learn. As the director of Department of Human Services (DHS), the supervising agency, I will do whatever it takes to strengthen the capacity of parents, communities, and neighborhoods in this effort.

The early childhood stakeholders in the city developed the Early Care and Education Strategic Plan. Under the technical leadership of the Center for Applied Research and Urban Policy of the University of the District of Columbia and the supervision of OECD, the strategic plan gradually took shape after four citywide forums, numerous revisions, and informal consultations. The final product represents the dreams and aspirations of early care and education stakeholders. I am particularly pleased that representatives of our federal partner, the Child Care Bureau of the Administration for Children and Families, U.S. Department of Health and Human Services, and the District's Public School System participated in the development of the strategic plan.

We are fortunate that Mayor Anthony Williams considers early care and education, the cornerstone of his administration's human services agenda. We are also very grateful for the unreserved support and encouragement from the Deputy Mayor, Carolyn N. Graham who is the chief architect of the Safe Passages Initiative and who served for many months as the Interim Director of the agency.

To make Washington, DC the best city in America, we must aspire to be the best in caring for our children. I hope that our citizens will continue to participate, and to influence the District's early care and education policies and programs. This strategic plan provides a policy and program roadmap on how to meet our responsibilities - public or private - to our children.

Carolyn W. Colvin
Director
Department of Human Services

ACKNOWLEDGEMENTS

Barbara Ferguson Kamara, the Executive Director of the District of Columbia Office of Early Childhood Development (OECD), Department of Human Services deserves great credit for inspiring the citywide strategic planning process on early care and education. As a leading expert on early childhood development, Ms. Kamara is at home with the strategic, executive and operational issues in early care and education. Ellen Yung-Fatah, the former program manager, Human Services Facilities Division, Department of Health, worked closely with Ms. Kamara to ensure the take-off of this project.

The staff of OECD worked closely with the project team on logistics and participated in the citywide planning forums. The Mayor's Advisory Committee on Early Childhood Development (MACECD) through some of its members participated in the citywide planning forums and provided technical support.

In addition to providing funds for this project, the Child Care Bureau of the Agency for Children and Families, U.S. Department of Health and Human Services, was represented by senior staff members during the citywide forums. Dr. Antonia Nowell and members of her staff from the PATHS program of the University of the District of Columbia volunteered crucial logistic support during key stages of the planning process, and participated in the citywide forums. Gwendolyn Kelly helped in facilitating meetings and O. Xavier Hixon designed workshop materials.

Finally, the stakeholders that took time off their busy schedules to participate in one or more of the citywide planning forums deserve special commendation. These stakeholders. including parents, early care and education providers, researchers, community activists, professional groups, and policy makers, enriched the strategic planning process with their unique perspectives and experiences. The District's Early Care and Education Strategic Plan is a testament to their commitment to the age-appropriate development of our youngest citizens.

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EXECUTIVE SUMMARY

The Office of Early Childhood Development (OECD), District of Columbia Department of Human Services (DHS), contracted with the Center for Applied Research and Urban Policy (CARUP), University of the District of Columbia to develop a citywide early care and education strategic plan. A comprehensive review of the District's early care and education system became necessary for many reasons.

First, although the District's early care and education indicators are comparable to other cities in America, there is room for improvement in the area of early care and education subsidy programs for low income families. Second, children that are eligible for early care and education services may not receive them on time because of the limited numbers of facilities for early childhood development, particularly infant and school-age care, in the District. Third, the District government does not pay competitive subsidy reimbursement rates to early care and education providers. Fourth, the District has a high concentration of low income workers, especially those that work in the service industry (hotels, restaurants, etc.). These workers require the non-traditional but pricey evening and weekend early care and education programs to accommodate their work schedules. Finally, the District is in the process of revamping its 25-year old regulations for child development facilities.

To facilitate the strategic planning process, the staff of CARUP completed the review of the World Bank and Miami 1998 Conferences on Setting a Strategic Early Care and Education Research Agenda, prepared background technical documents on early care and education and strategic planning, and met with officials of the OECD. Between July 1999 and March 2000, the staff of CARUP organized four citywide forums on early care and education, targeting specific stakeholders such as the leadership of District government agencies that deal with early care and education issues; early care and education professionals that provide direct services or advocate for improved early care and education programs; and parents of children in the early care and education system. The forums held at the University of the District of Columbia attracted more than 100 individuals and 35 agencies, ranging from heads of government oversight and regulatory agencies to the leadership of professional and advocacy organizations, and mothers participating in the Temporary Assistance to Needy Families (TANF) program.

The major highlights of the early care and education forums were the identification of "top ten" early care and education issues in the District, the adoption of public/private collaborations as the strategic mechanism for achieving equitable and quality early care and education, and the consensus development of draft vision, mission, and goal statements.

During these forums, the major stakeholders worked together in randomly determined groups to identify key early care and education issues in the District. Policy makers, regulators, parents, advocates, and providers worked toward similar goals and objectives, and crafted consensus statements on identified early care and education problems.

Top Ten Early Care and Education Issues in Washington, DC

In order of priority, the participants in the early care and education forums identified the following issues:

1) High Quality Early Care and Education;

2) Shared/Adequate Resources;

3) Health/Safety/Nutrition of Children under Care;

4) Accessibility and Availability of Early Care and Education Services;

5) Promulgation and Enforcement of Policies, Rules and Regulations;

6) Inclusion of all Stakeholders in Policy Development and Program Planning;

7) Affordability of Early Care and Education Services;

8) Internal Communication between Government Agencies, and External Communication between Government Agencies and External Stakeholders;

9) Equitable Pay for Well-Trained Early Care and Education Professionals; and

10) The Training and Continuing Education of all Early Care and Education Personnel.

Vision Statement

All children and families in the District of Columbia receive quality early care and education services in an inclusive, culturally respectful environment that nurtures each child's individual developmental and educational needs.

Mission Statement

The mission of the Interagency Collaboration for Early Care and Education is to foster a public and private partnership to advocate on behalf of children and families. The partnership is committed to ensuring a foundation of learning and development through a financially stable, integrated and seamless early care and education delivery system, valued by society and able to sustain a well-compensated, consistent, qualified work force.

Strategic Goals

1. **Foster public-private collaboration** to:
   - Support a comprehensive, integrated, and seamless early care and education delivery system;
   - Encourage communication within the collaborative through the development of an effective consensus platform; and
   - Establish linkages to include non-traditional stakeholders.

2. **Ensure accountability in the early care and education system** through:
   - Regulations;
   - Monitoring;
   - Outcome measures; and
   - Policy and procedures.

3. **Develop financially stable and viable systems** that provide:
   - Pay equity;
   - Sufficient resources, including an emergency back up system;
   - Fiscal linkages;
   - High compensation; and
   - Maximizing of dollars.

4. **Integrate service delivery** to:
   - Assure continuity of services; and
   - Include research, technical support and development.

5. **Advocate on behalf of children and families**:
   - With regard to all service systems;
   - Heighten public awareness of importance of early care and education; and
   - Increase professional recognition.

6. **Ensure professional development** through:
   - Training, including GED and mental health;
   - Documentation and trainer certification;
   - Linking opportunities for training; and
   - Eliminating barriers to training for current and future early care and education staff.

Plan Linkages

Mayor Anthony Williams, soon after assuming office, initiated a citywide strategic planning process to set priorities and articulate a vision for the District. A major focus of the strategic planning process is the deliberate involvement of District residents in the design of city-wide programs and policies. The Citizens Summit of November 1999 attracted more than 3,000 city residents who spoke clearly and forcefully on a range of issues such as improving the public schools, revitalizing neighborhoods, and assisting families to raise their children in a safe and healthy environment.

The City-Wide Strategic plan is focusing on five major areas, known as the Safe Passages Program:

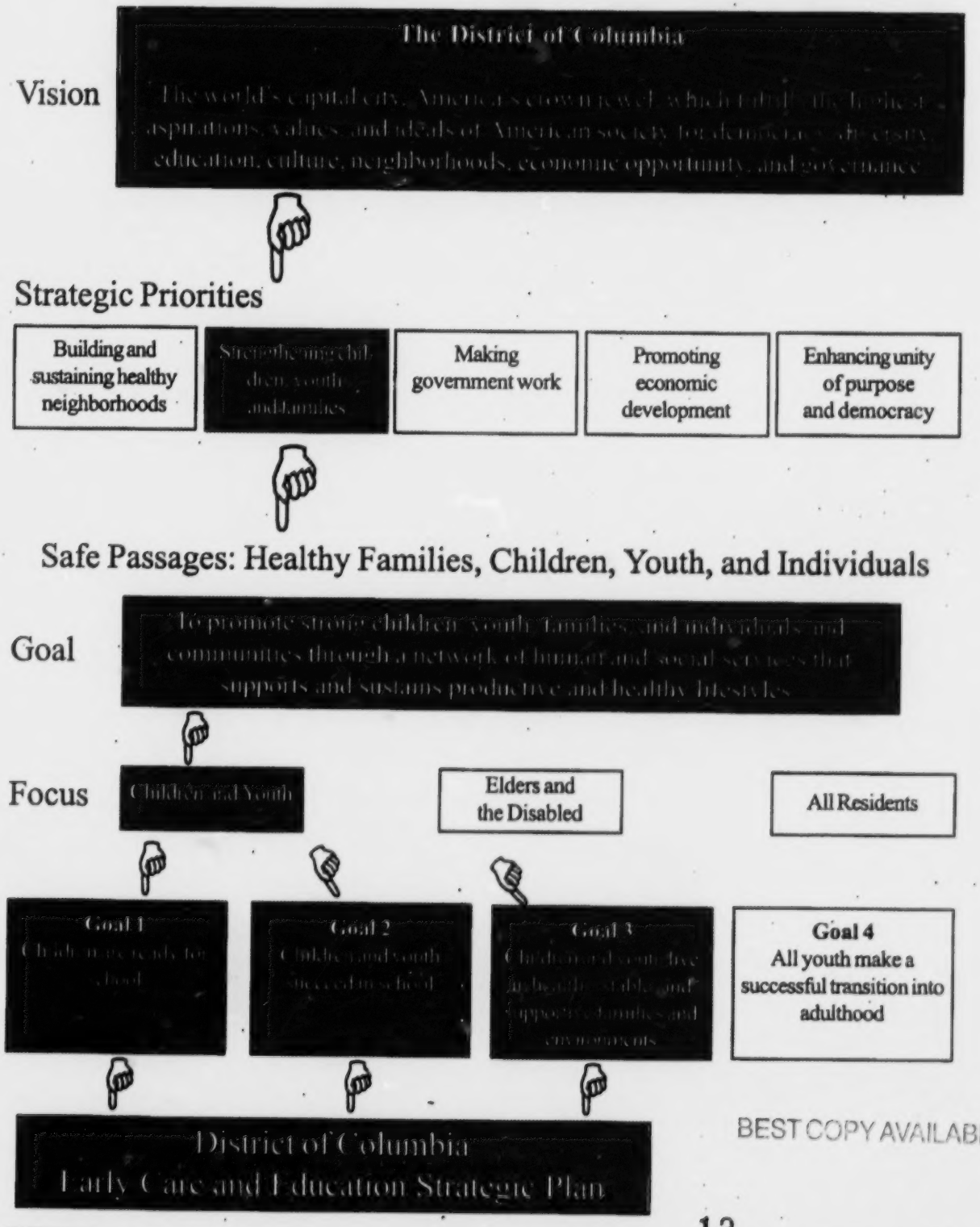
- Building and sustaining healthy neighborhoods;
- Assuring economic development;
- Making government work;
- Improving democratic practices in the District; and
- Ensuring that families, youth, and individuals are healthy and productive.

As shown on the diagram on the next page, the Mayor's priority to strengthen children, youth, and families, and the Safe Passages Program reflect a strategic focus on children and youth. The Office of Early Childhood Development (OECD), according to the blue print of the Safe Passages Program, has responsibilities related to three of the four goals of the program as shown in the diagram.

The proposed Early Care and Education Strategic Plan is a logical continuum of city-wide efforts to prepare District of Columbia children for effective schooling and to help children and youth succeed once enrolled in school. These efforts are designed to support families and create conducive environments for the city's children and youth to learn and prosper.

Figure 1: Relationship of Strategic Plans

District of Columbia City-Wide Strategic Plan



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WHY DEVELOP AN EARLY CARE AND EDUCATION STRATEGIC PLAN?

The Concept of Early Care and Education

To discuss the need for a early care and education strategic plan for the District, it is important to briefly review the concept of early care and education. Early care and education is defined as the non-parental care of children from birth through thirteen years of age.[1] Early care and education programs range from child care centers to family child care homes, after-school care for children, and independent facilities managed with public or private sector funds.[1-4] Early care and education experts, sometimes, equate child development programs and early childhood programs with child care. However, child care is a major component of early childhood development. The other components of early childhood development are early childhood education and early intervention programs for children at risk or living with disabilities.[1,4,5]

Quality early care and education is a critical issue for millions of families with small children. It is even more critical for families with working parents who depend on quality non-parental care for their children during the working hours. [1-7] More important, early care and education is an invaluable resource for low income families who are already in the labor force or anticipating working outside of their home environment. For low income families that work non-traditional hours, such as night shifts or weekends, the availability of early care and education is an absolute necessity for continued employment.

The 1996 Welfare reform legislation highlighted the importance of personal responsibility and early care and education as a bipartisan national policy issue. [5] The availability of early care and education is a major predictor of the Welfare reform since its success depends on the ability of low income, and low-skilled parents to find quality, safe early care and education that meets the needs of their children.[1,5,7] The funding of early care and education programs has largely remained a bipartisan priority at national, state, and local levels of government.

The Child Care Bureau, [6] of the U.S. Department of Health and Human Services, identifies four principal components of quality early care and education:

- A safe and healthy environment for each child;
- Effective parental involvement;
- Training and support for early care and education providers; and
- Continuity of care.

In the District, the provision of quality early care and education is a priority of the Mayor. Mayor Anthony Williams listed the availability of early care and education as his major agenda for human services during the 1998 mayoral campaign. In the Mayor's Strategic Plan for the District (2nd Draft, 2000), quality early care and education is a cornerstone of the District government strategy on children and youth.[8]

At the national level, early care and education was a major objective of the Clinton Administration. President Clinton,[7] in 1998, listed the following issues as the **nation's "unfinished" child care agenda**:

- The need to help families pay for child care;
- The need to improve the quality of child care;
- The improvement of all Federally-sponsored early care and education programs;
- The importance of funding the construction of effective after-school programs;
- The need to improve the safety and quality of child care;
- The critical importance of promoting early learning;
- The need for facilitated background checks on child care; and
- The need to strengthen the Head Start program.

Critical Components of Successful Early Care & Education Systems

Early care and education experts unanimously agree on the relevance of early care and education to the age-appropriate development of children.[1-6,9] The relationship between appropriate stimulation of infants and toddlers and optimal emotional, intellectual, and social development has been established.[1-3] However, the exact attributes or components, of an ideal early care and education system is still a subject of academic, program, and policy debate.[1-6]

For the purposes of a strategic planning process, the components of early care and education, as identified by the Annie E. Casey Foundation, [3] are instructive and germane to a population-based approach to quality early care and education:

- **Affordability of Care**: Every family irrespective of income levels should be able to pay for early care and education;
- **Accessibility to Care**: Parents must have access to affordable care for their children when and where they need it;
- **Care for School-Age Children**: As more parents work longer hours, policy makers should develop early care and education programs that meet the needs of their children during school and after-school hours;
- **Community Mobilization toward Effective Early Care and Education**: In the final analysis, only residents of local communities can effectively improve their early care and education programs;
- **Family Early Care and Education**: In addition to center-based care (which accounts for less than 33% of all care), reform efforts should also focus on family early care and education providers;
- **Quality of Care**: All jurisdictions should strive to provide top quality early care and education. Until a gold standard becomes available, every community may have to define the parameters of acceptable, quality care.
- **Professional Development of Caregivers**: The training, compensation, work environment, and motivation of caregivers represent important investments in early childhood development; and

- **Consumer Awareness**: Parental information regarding child care options is very important. The participation of parents and other stakeholders in the design and evaluation of child care programs is also crucial.

The Need for an Early Care and Education Strategic Plan

According to a document published jointly by the D.C. Departments of Human Services and Health,[10] the development of a strategic plan is the logical conclusion of the December 1997 District/Federal initiative to revamp the District early care and education system. During the White House meeting in December 1997 on the District Child Care program, the following issues were identified:

- D.C. Early Care and Education Subsidy Reimbursement rates were as low as 61% of the market rate, with several providers of infant care withdrawing or threatening to bolt from the Early Care and Education Subsidy Program;
- D.C. child development facility regulations had not been updated in 25 years because the Mayor had no authority to promulgate regulations;
- Both the Departments of Human Services and Health either lost or were unable to hire staff (even with federal dollars) at a time of major increases in the number of providers and clients;
- The DHS Office of Early Childhood Development (OECD) tried for two years to purchase computers and experienced significant problems with their automated system; and
- A report from MAXIMUS, a human services consulting firm, indicated that only one fourth of the parents receiving early care and education subsidy were in the TANF program.

Following high-level meetings between DHS officials and Federal staff, the District developed a short term plan for early care and education, with nine objectives and forty-two action steps.[10] Since the development of the short term plan, the District had made significant progress on each of the nine objectives and action steps.[10] The Departments of Human Services and Health also initiated the development of an early care and education quality improvement strategic plan with the charge of identifying problems associated with the District early care and education system, especially issues related to licensing and subsidized care.[11]

The work on the quality improvement early care and education plan progressed until the third draft in June 1998.[11] This draft identified the basic challenges of early care and education in the District, reviewed existing public/private collaborations, evaluated internal and external strengths and weakness of the early care and education,

and made recommendations on early care and education strategies, goals, and objectives. Key players in the development of the draft quality improvement plan actively participated in the strategic planning effort.

An important outcome of the Citywide effort to improve early care and education was the commissioning of the 1998 Market Rates and Capacity Utilization Survey Study conducted by CARUP on behalf of OECD.[12] The early care and education providers participating in the DHS subsidy program, according to the study, earn less money than their peers who do not participate. DC market rate providers earn more money than early care and education providers under contract with the District government. According to the study, the District government pays below market rates for family early care and education services, infant care, toddler care, preschool care, and school age care. This has led to some providers refusing to participate in the District's Early Care and Education Subsidy program. On a positive note, the District government is responding to these anomalies: the government raised early care and education rates twice in the last two years, and established rates for care during non-traditional hours and days. Effective June 1, 2000, the District implemented a tiered rate reimbursement system with payments tied to quality indicators.

Another important reason for developing a strategic plan is the need to coordinate citywide efforts to improve early care and education indicators. According to recent nationwide data on early care and education,[3, 9, 13] the District, compared to other states and cities, is holding its own on key indicators such as child-to-adult ratios, group size, accredited centers, safety of accredited early care and education centers, training programs for providers, and availability of tax breaks and subsidies. According to the *Ladies Home Journal* Survey of February 2000,[13] the District ranks 5th among cities in North America in "Taking Care of Kids," with cities such as New York and Ontario ranking 191st and 194th respectively.

The District also ranked number one for "Healthy Haven" for children among 200 cities, beating every city in the United States including Los Angeles and New York. The city was also tagged the "Opportunity Capital" for working women by the Ladies Home Journal.[13]

Although these ratings are encouraging, it is important to realize that the District continues to face major early care and education challenges because of the following structural and socioeconomic issues:

- According to the Annie E. Casey Foundation,[3] the District in 1999, ranked 51st on the following indicators that negatively impact on the ability of District residents to receive optimal early care and education services;
  - Low birth weight rates;
  - Percent of unemployed or partially employed parent (1996);
  - Percent of children in poverty;
  - Percent of families headed by a single parent;
  - Percent of families with children under 18 headed by single parents

- The District ranked 28th in percent of children under age 13 living with low income, working parents. Single parent households are more likely to live in poverty compared to dual parent households.[3] They are also more likely to be impacted with early care and education problems as they juggle work and home schedules. Children that live in poverty or low income families are unlikely to have access to quality or affordable early care and education programs.[1-4]

- Childhood education statistics for the District are not encouraging. According to the 1999 DC Kids Count publication,[14] the kindergarten enrollment in the District's early childhood education programs declined for the second time in the last decade (since the 1989/1990 school year). Preschool placement in the full-day program for four-year-olds also declined by I0% between 1998 and 1999 school years. District public school students (DCPS), have average Scholastic Aptitude Tests that are 18% lower than their peers nationally.[14] At most grade levels, DCPS students are behind the national averages in reading performance. They also lag in math proficiency tests, with worsening performances as students move up to higher grades.[14]

- Homelessness is also a major problem in the District. In 1998, 989 new families with 2,413 children applied for emergency shelter in the District. Sixty percent of the children in families applying for emergency shelters were five years of age or younger. Homeless children are unlikely to receive quality early care and education. [14]

- The successful outcome of the 1996 Welfare reform in the District will depend largely on the availability of quality early care and education for TANF families. These families must benefit from affordable and accessible early care and education in order to work or fulfill the work requirements of the TANF program. The District faces a major challenge of managing the Early Care and Education Subsidy Program because of the large number of potential clients and shortfall in quality early care and education centers and providers. [9]

- Finally, until this year, the District's child development facility regulations had not been updated in 25 years. In addition, the District had no infant or school age program regulations. It also had no regulations for children with disabilities. The District Council recently passed legislation authorizing the Mayor to promulgate child development facility regulations. A citywide task force is also developing draft regulations to cover all aspects of facility licensing.

THE PROCESS OF DEVELOPING THE EARLY CARE AND EDUCATION STRATEGIC PLAN

The staff of CARUP, as the facilitators of the process, adopted the following principles:

1) The strategic planning effort cannot be "owned" by any single government agency;

2) The planning process should build upon the gains made during the development of the draft *DC Early Care and Education Quality Improvement Strategic Plan*;

3) The planning process cannot evolve along the usual dichotomy of public vs. private sectors;

4) The process will identify key stakeholders and quickly harmonize their issues and concerns;

5) The process will benefit from a strong technical emphasis on consensus early care and education paradigms, lessons learned in other jurisdictions, and the work of leading early care and education advocacy institutions; and

6) The ultimate strategic plan should reflect early care and education priorities in the District.

To actualize these principles, CARUP organized four citywide forums for early care and education stakeholders between July 1999 and March 2000 at the University of the District of Columbia.

The first forum focused on the role of District agencies that deal with early care and education. The participants were the principal leaders of these agencies. The second forum involved mainly the early care and education professionals performing direct services, regulatory, monitoring, and training functions. The third forum brought together parents of children in the District's early care and education system, leaders of District agencies, and leaders of advocacy organizations. CARUP held the final forum in March 2000 to refine the goal statements, develop strategic objectives, define potential strategies, and articulate responsibility centers, time frames, and performance indicators. More than 100 individuals and 35 agencies, ranging from heads of government oversight and regulatory agencies to advocacy and professional organizations, and mothers participating in the Temporary Assistance to Needy Families (TANF) program, attended the forums.

At each forum, the participants received a notebook that listed the major aims and objectives of the strategic planning exercise, technical background materials, and ample writing implements for individual and group exercises. The technical back-

ground materials were developed by reputable and nationally known organizations such as the Child Care Bureau of the U. S. Department of Health and Human Services, the National Child Care Information Center, the Annie E. Casey Foundation, the David and Lucille Packard Foundation for Children, the National Association for the Education of Young Children (NAEYC), and the OECD.[1-6, 15] The participants in each forum also received copies of the draft DC *Early Care and Education Quality Improvement Strategic Plan* and the *Early Care and Education and Development Fund Plan for the District FY 2000-2001.*

At each forum, the Director of CARUP, Dr. Deborah Lyons briefly presented an overview of strategic planning paradigms and principles, and challenged participants to work together in the interest of DC children. Dr. Lyons also created a collaborative atmosphere by engaging the participants in icebreakers that emphasized group rather than individual approaches to the early care and education problems identified during each forum. Participants in the forum worked in groups and reported their findings and conclusions to the general group.

Before the conclusion of each forum, the participants developed consensus statements and/or agreements. The CARUP staff analyzed the proceedings and prepared progress reports that were sent to the participants of each forum for review and possible amendments. The progress reports and analysis, including the unique passion index created by the CARUP, are available on request.

The major highlights of the early care and education forums were:

(1) The identification of "top ten" early care and education issues in the District;

(2) The adoption of public/private collaborations as the strategic mechanism for achieving equitable and quality early care and education;

(3) The consensus development of draft vision, mission, and goal statements; and

(4) The definition of strategic objectives, potential strategies, performance indicators, required data, responsible parties, required resources, and time frame.

The staff of CARUP, after a careful review of the proceedings and outcomes of the citywide forums on early care and education strategies and a rigorous review of academic and policy literature on early care and education, concluded that there are three major themes that reflect focal areas of urgent fiscal, policy, and management attention as shown in Figure 2 on the next page:

A. The service delivery environemnt, where top quality early care and education must be available for every child;
B. The decision making environment, with critical top level political and policy decisions on early care and education programs; and
C. The professional development environment, with the major objective of first class training and re-training programs for all cadres of early care and education workers.

Addressing these components of the early care and education services environment

represents a "whole focus approach" to service improvements.

Finally, to better implement the strategies articulated in this document, every stakeholder should recognize the interplay of internal and external forces toward the realization of the lofty vision and mission statements. Young children in the District can only receive quality care when the decision makers reconcile the often distinct preferences and interests of individuals and organizations that manage or influence internal and external factors impacting upon the availability and delivery of quality early care and education services.

The process used to develop the District of Columbia Early Care and Education Strategic Plan sought to bring together diverse stakeholders representing all interests in the early care and education community. Additionally, existing relevant documents were reviewed, where appropriate, with the overall goals and plans for the city. See Figure 3.

Figure 2
Components of the Early Care and Education Services Environment

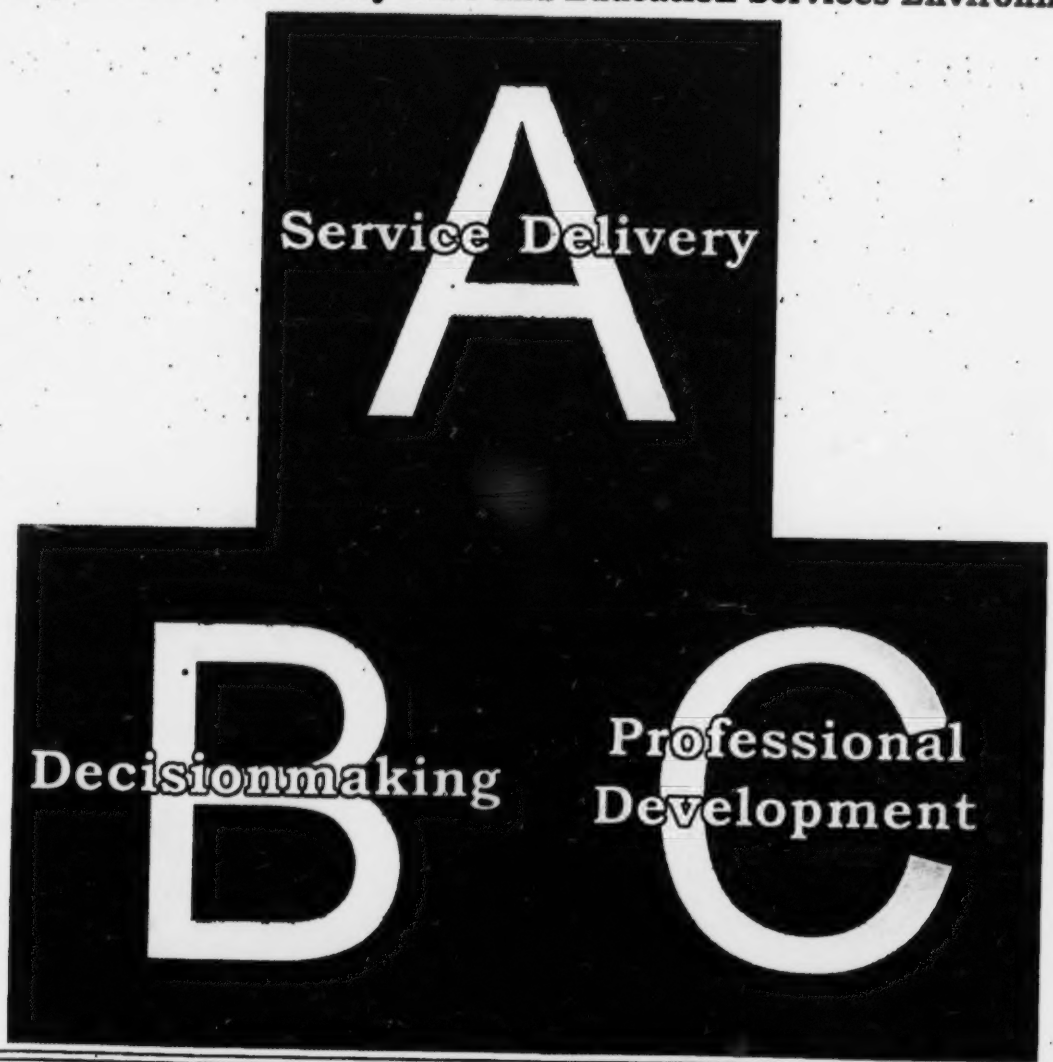
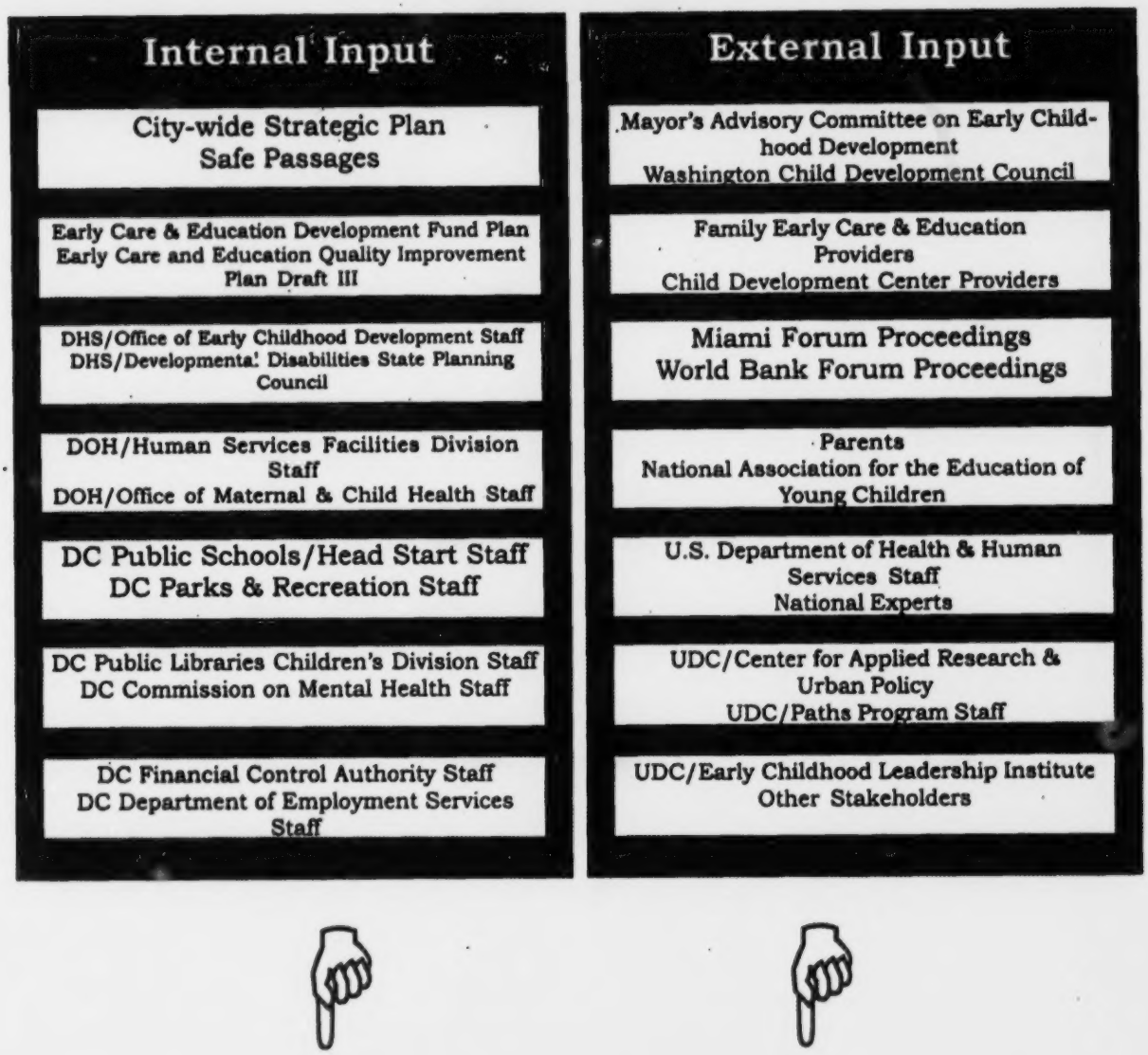


Figure 3
Sources of Input: Early Care and Education Strategic Plan Process


Internal Input
City-wide Strategic Plan
Safe Passages
Early Care & Education Development Fund Plan
Early Care and Education Quality Improvement Plan Draft III
DHS/Office of Early Childhood Development Staff
DHS/Developmental Disabilities State Planning Council
DOH/Human Services Facilities Division Staff
DOH/Office of Maternal & Child Health Staff
DC Public Schools/Head Start Staff
DC Parks & Recreation Staff
DC Public Libraries Children's Division Staff
DC Commission on Mental Health Staff
DC Financial Control Authority Staff
DC Department of Employment Services Staff
External Input
Mayor's Advisory Committee on Early Childhood Development
Washington Child Development Council
Family Early Care & Education Providers
Child Development Center Providers
Miami Forum Proceedings
World Bank Forum Proceedings
Parents
National Association for the Education of Young Children
U.S. Department of Health & Human Services Staff
National Experts
UDC/Center for Applied Research & Urban Policy
UDC/Paths Program Staff
UDC/Early Childhood Leadership Institute
Other Stakeholders
District of Columbia
Early Care and Education Strategic Plan

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TOP TEN EARLY CARE AND EDUCATION ISSUES IN THE DISTRICT AND THE VISION, MISSION, AND GOAL STATEMENTS

The participants in the first forum of D.C. agencies organized by CARUP deliberated on multiple early care and education issues in the District. The CARUP staff analyzed the stated preferences of the participants and compiled the top ten early care and education issues in the District, using simple percentages. (The details are available on demand.) The top ten list was shown to participants in the next two forums for review and amendment.

Top Ten Early Care and Education Issues in Washington, DC:
In order of priority, the issues are:

(1) High Quality Early Care and Education;

(2) Shared/Adequate Resources;

(3) Health/Safety/Nutrition of Children under Care;

(4) Accessibility and Availability of Early Care and Education Services;

(5) Promulgation and Enforcement of Policies, Rules, and Regulations;

(6) Inclusion of all Stakeholders in Policy Development and Program Planning;

(7) Affordability of Early Care and Education Services;

(8) Internal Communication among Government Agencies and External Communication between Government Agencies and External Stakeholders;

(9) Equitable Pay for well-trained Early Care and Education Professionals; and

(10) The Training and Continuing Education of all Early Care and Education Personnel.

The draft vision, mission, and goal statements evolved as a consensus exercise. From the report-out sessions of each forum, CARUP staff analyzed the consensus statements and sent draft statements to the participants. The final draft of report-out sessions reflected the revisions suggested by the participants. The draft vision statement was developed first, followed by the draft mission statement, and finally the draft goal statements and implementation strategies.

In the evolving process leading to the drafting of vision and mission statements, the stakeholders asserted that in the District of Columbia quality early care and education is care that is safe, affordable, accessible, and family-focused, provided by qualified and competent staff in an inclusive and culturally respectful environment.

Vision Statement

All children and families in the District of Columbia receive quality early care and education services in an inclusive, culturally respectful environment that nurtures each child's individual developmental and educational needs.

Mission Statement

The mission of the Interagency Collaboration for Early Care and Education is to foster a public and private partnership to advocate on behalf of children and families. The partnership is committed to ensuring a foundation of learning and development through a financially stable, integrated and seamless early care and education delivery system, valued by society and able to sustain a well-compensated, consistent, qualified work force.

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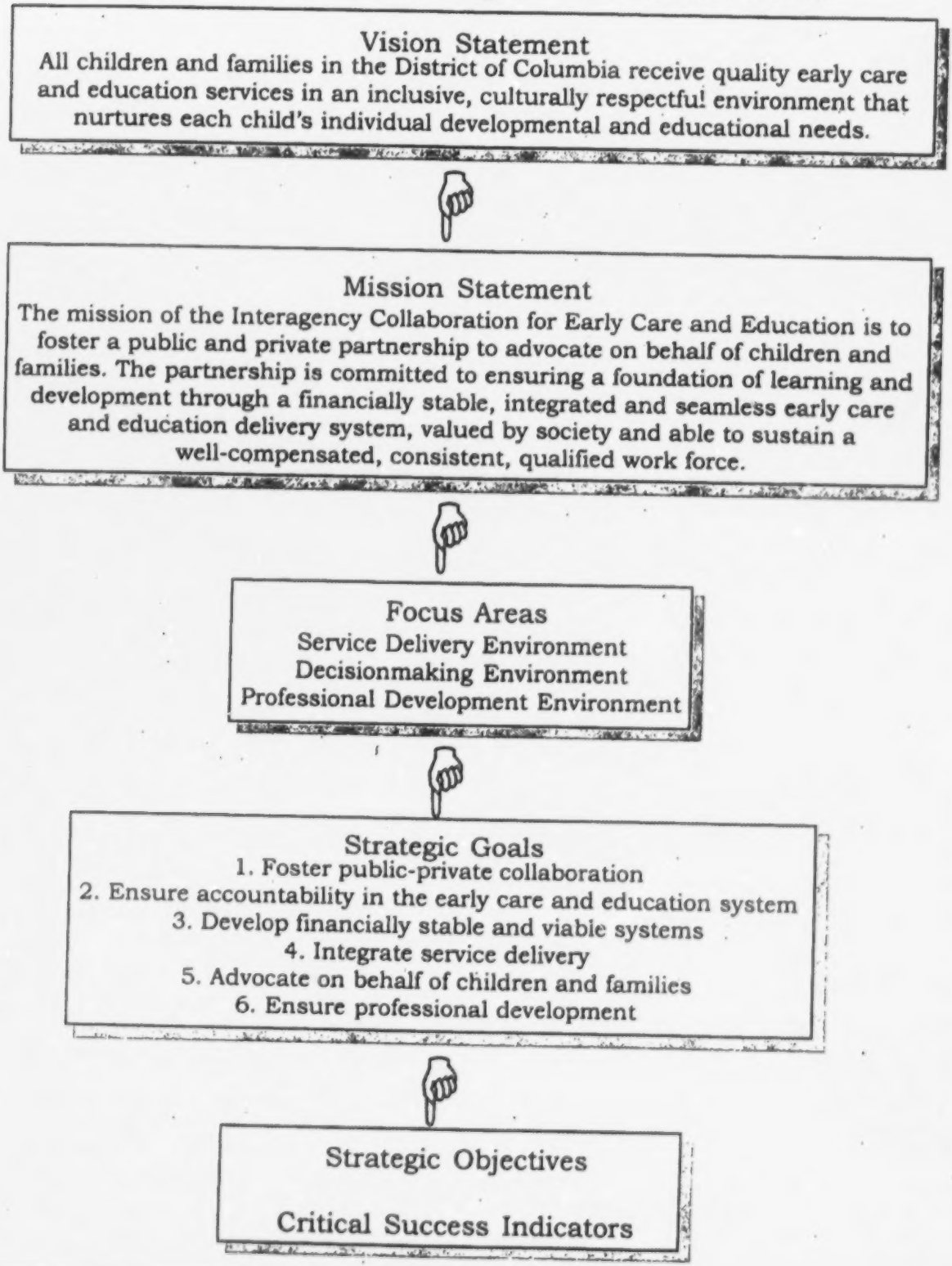
Figure 4: Overview of the District of Columbia Early Care and Education Strategic Plan - June 2000


Vision Statement
All children and families in the District of Columbia receive quality early care and education services in an inclusive, culturally respectful environment that nurtures each child's individual developmental and educational needs.
Mission Statement
The mission of the Interagency Collaboration for Early Care and Education is to foster a public and private partnership to advocate on behalf of children and families. The partnership is committed to ensuring a foundation of learning and development through a financially stable, integrated and seamless early care and education delivery system, valued by society and able to sustain a well-compensated, consistent, qualified work force.
Focus Areas
Service Delivery Environment
Decisionmaking Environment
Professional Development Environment
Strategic Goals
1. Foster public-private collaboration
2. Ensure accountability in the early care and education system
3. Develop financially stable and viable systems
4. Integrate service delivery
5. Advocate on behalf of children and families
6. Ensure professional development
Strategic Objectives
Critical Success Indicators

Implementation Strategies

Strategic Goal 1

Foster public-private collaboration to support a comprehensive, integrated, and seamless early care and education delivery system; encourage communication within the collaborative through the development of effective consensus platform; and establish linkages to include non-traditional stakeholders.

Strategic Objectives

1.1: Identify businesses that are beneficiaries of early care and education services (business = federal and local government, private sector, hospital/medical, university).
1.2: Establish an Early Care and Education Business Council in collaboration with the DC Chamber of Commerce and DC Board of Trade.
1.3: Establish a Business Liaison position within OECD

Implementation Strategies

1.1.1: Identify existing partnerships and build on them.
1.2.1: Identify and contact businesses to name representatives to council.
1.3.1: Survey business leaders to determine what kind of needs and resources to contribute.

Critical Success Indicators	Responsible Parties
1.1.2 • **Publish** a citywide Directory of D.C. Businesses that benefit from early care and education services. • **Publish** annual update of the Directory • **Publish** summary update (annual) of the Directory by demographic, economic, and social indicators	1.1.3 • OECD • D.C. Chamber of Commerce • UDC/CARUP • D.C. MACECD • DCRA • DOES
1.2.2 • **Establish** the DC Early Care and Education Business Council with members appointed by the Mayor, after consultation with the Chamber of Commerce and Board of Trade.	1.2.3 • OECD Liaison • Office of the Deputy Mayor for Children, Youth and Families • Office of the Deputy Mayor for Economic Development
1.3.2 • **Establish** the position and hire the OECD Business Staff.	1.3.3 • OECD Staff • DC Personnel Office No. 1 • DHS Budget Office

Time Frame

1.1.4: 12 months after the hiring of the OECD staff
1.2.4: 12 months from establishment of Liaison position
1.3.4: Fiscal Year 2002

Data Required	Required Resources
1.1.5 • Inventory of DC businesses from (DCRA) and (DOES) • Secondary Analysis of the recent DC Chamber of Commerce survey • Secondary Analysis of the 1999 OECD study where DC Parents of children in the subsidy program live, work and procure early care and education	1.1.6 • OECD Liaison and staffs of responsible parties identified in 1.1.3 • Money to print the Directory and Reports
1.2.5 • List of businesses selected from Strategic Objective 1.1 • Identification of DC Business executives active in the early care and education arena • Identify and incorporate best practices from other jurisdictions, e.g., Fairfax County	1.2.6 • Meeting place • Administrative Support from OECD • Publicity and educational support • The early care and education Finance Project
1.3.5 • Determination of whether funding is available for position • Job description of similar position in other cities/jurisdictions • Best practices of position in other jurisdictions • Information from OECD on established position	1.3.6 • Funding for position • OECD staff time to develop responsibilities, position description, interview, etc.

Strategic Goal 2

Ensuring accountability in the early care and education system through regulations; monitoring; outcome measures; and policy procedures.

Strategic Objectives

2.1: Develop early care and education facility regulations that are attainable and enforceable.
2.2: Develop and use a monitoring tool/instrument that will ensure quality of all early care and education programs.
2.3: Ensure that all stakeholders are knowledgeable about early care and education regulations and monitoring assessment tools.
2.4: Develop policy procedures that are attainable and enforceable.

Implementation Strategies

2.1.1: Finalize Draft VI of DCMR 29 Chapter 3.
2.2.1: Identify the key persons needed to assist in developing the monitoring tool/instrument and develop the assessment tool.
2.3.1: Provide training to the stakeholders about the early care and education regulations and monitoring assessment tools/instrument.
2.4.1: Identify the key persons needed to assist in the development of the monitoring tool/instrument.

Critical Success Indicators	Responsible Parties
2.1.2 • The **promulgation** of the revised DCMR 29 Chapter 3 • The **Development** and **Implementation** of the Action Plan for the training of DOH and OECD staff, early care and education providers, etc. on the revised regulations • The **development** and **implementation** of a citywide monitoring and evaluation protocol.	2.1.3 • OECD Staff • DHS General Counsel Office • DOH, DCRA, Fire and Emergency Department • Early care and education providers, parents, & advocates • UDC/CARUP • MACECD
2.2.3 • **Selection** of Test Instrument/s • **Hiring** of a nationally recognized expert as a consultant • **Conduct** a Pilot Study of Test Instruments • **Establish** a citywide quality assurance monitoring protocol.	2.2.4 • OECD, DOH

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Strategic Goal 2 cont'd

Critical Success Indicators	Responsible Parties
2.3.2 • **Conduct** Annual Training for stakeholders • **Conduct** Biannual Focus Group study on the Knowledge, Attitude, and Perception (KAP) of stakeholders on early care and education regulations and monitoring assessment tools.	2.3.3 • OECD Staff • DOH, DCRA • DHS General Counsel Office • Early care and education providers, parents, & advocates • MACECD
2.4.2 • **Hire** a national expert on policy and procedure as a consultant • **Establish** an early care and education policy and procedure manual that meets or exceeds national standards • **Implement** an Action plan for training DOH and DHS staff, early care and education providers, and other stakeholders on the new policy and procedures manual • **Implement** a monitoring mechanism that evaluates the consistent use of the manual.	2.4.3 • OECD Staff • DOH, DCRA, Fire and Emergency Department • Early care and education providers, parents, & advocates

Time Frame

2.1.4: 12 months
2.2.5: 18 months
2.3.4: 12 months
2.4.4: 12 months

Data Requirements	Required Resources
2.1.5 • Best Practices in other states • Final, approved version of DCMR 29 Chapter 3 • Cost-Benefit Analysis of Regulations on Providers, Parents, and Staff of oversight agencies • Baseline and Trend Data on regulation enforcement • Focus Group studies	2.1.6 • Funding from OECD for printing and mailing, data analysis, focus group studies, and cost/benefit analysis • NARA • Trainer, space for training

Strategic Goal 2 cont'd

Data Required	Required Resources
2.2.6 • State-of-the-art review of quality issues • Best Practices from other states • Pilot study of test instruments • Data from, and the utility/applicability of the Environmental Rating Scales from the Porter Graham Institute in Chapel Hill, NC	2.2.7 • Funding from OECD for literature reviews, pre-and-post testing of instruments, pilot study, refinement of instruments, hiring of consultant, training of development assessors
2.3.5 • Baseline and Trend data on the KAP of stakeholders • Best Practices in other states • Evaluation of the Annual Training program	2.3.6 • Funding from OECD for KAP studies, training programs, printing, and mailing • Trainer, space for training
2.4.5 • Best Practices from other states and jurisdictions • Best Practices from NARA and other technical organizations	2.4.6 • Funding from OECD for consultant, training, printing and mailing • Trainer, space for training

Implementation Strategies

Strategic Goal 3

Develop financially stable and viable systems that provide pay equity; sufficient resources, including emergency back-up system; fiscal linkages; high compensation; and maximizing of dollars.

Strategic Objectives

3.1 Increase rates to market and to cover actual cost of care in quality/accredited programs.
3.2 Develop the resources needed for a financially stable and viable early care and education system.
3.3 Create a substitute pool across job functions.
3.4 Develop options for benefits packages for early care and education providers.

Implementation Strategies

3.1.1 Complete Market Rate Report and use to make rates decisions
3.2.1 Gather data about existing resources (Head Start; Early Start; Child Care and Development Fund; Child Care Food program; Pre-K program (DCPS); Social Services Block Grant; Medicaid (EPSDT))
3.2.2 Gather data about potential resources (Medicaid EPSDT; Title IV-E; USDA Food Program; Community Development Block Grant for Facilities; TANF)
3.2.3 Conduct study of actual early care and education provider costs for accredited comprehensive and top quality programs
3.2.4 Study the universe of children to be served (those needing services versus those served)
3.2.5 Develop a budget that addresses the need
3.3.1 Review models of best practices
3.3.2 Identify substitutes for directors, classroom staff, and early care and education providers
3.4.1 Determine health care cost for single, uninsured, uncompensated, transitioning from TANF
3.4.2 Determine cost of establishing retirement benefits
3.4.3 Conduct prospective studies on city wide benefits options for early care and education

Critical Success Indicators

3.1.2
- The completion of the 2000 Market Rate Capacity Report and the Report used to establish rates and other decisions.
- Upward revision of current market rates.

Responsible Parties

3.1.3
- UDC/CARUP
- Center/Home providers
- OECD and DOH Child and Residential Facilities Division
- MACECD
- Resource and Referral Services (WCDC)
- DC Office of Planning

Strategic Goal 3 cont'd

Critical Success Indicators	Responsible Parties
3.2.6 • The **development** of the framework for a Universal Early Care and Education program for the District that will include parameters for baseline and trend data. • The **implementation** of a Universal Early Care and Education program.	3.2.7 • OECD • Office of the Deputy Mayor for Children, Youth and Families • MACECD • DCPS • DOH Child and Residential Facilities Division • Private Providers
3.3.3 • **Publish** a policy options paper on the best practices for substitute programs. • **Implement** a citywide substitute pool program that meets the gold standards of the industry.	3.3.4 • OECD • MACECD
3.4.3 • **Publish** and distribute a policy options paper on fringe benefits for early care and education providers. • **Establish** citywide fringe benefits package for providers. • **Implement** citywide monitoring and evaluation program on benefits	3.4.4 • OECD • DOH • UDC/CARUP • NCCIC • DC Insurance Commission • DC Office of Policy and Planning • DC Office of Aging

Time Frame

3.1.4

• Conduct Survey from 2/00 to 9/00
• Review of the Survey by the Rates Task Force from 10/00 to12/00
• Announce Rates Increase on or before 9/01

3.2.8

• Develop the framework 6 months after the adoption of the Early Care and Education Strategic Plan
• Implement the Universal Early Care and Education program 24 months after the adoption of the Strategic Plan

3.3.5

• 12 months after the adoption of the Strategic Plan

3.4.5

• 12 months after the adoption of the Strategic Plan

Strategic Goal 3 cont'd

Data Required	Required Resources
3.1.5 • Year 2000 market rates • Profile of provider staff • Turnover information • Current provider benefits from other national data • Secondary analysis of the OECD Cost and Quality study • Best Practices from contiguous jurisdictions	3.1.6 • Funding from OECD • Graduate Interns from Area Universities to conduct summary analysis of data
3.2.9 • Obtain data from Strategies 2.11, 2.21, 2.22, 2.23, 2.24 • Policy review of the models of best practices in other jurisdictions	3.2.10 • OECD Staff Liaison • OECD Policy Analyst • Computer Workstations
3.3.6 • Best practices from other cities and jurisdictions • Review of the Literature • Technical Assistance from the Early Care and Education Group 1	3.3.7 • OECD Staff Liaison • OECD Policy Analyst • Funding from OECD and National Child Care Information Center (NCCIC)
3.4.6 • Baseline data on benefit packages from DC Govt. Agencies and Private Providers • Best Practices from other States and Cities • Actuarial analysis of benefits (trend, scenarios, decision analysis) to DC providers	3.4.7 • OECD Policy Analyst • OECD Staff Liaison • Actuary Expert • MIS Specialist

Implementation Strategies

Strategic Goal 4

Integrate service delivery to assure continuity of services; and include research, technical support, and development.

Strategic Objectives

4.1 To provide a comprehensive integrated service delivery system to ensure quality services that meets the needs of families in the District of Columbia by the end of year 2002.
4.2 Strengthen system outcomes for foster care, early care and education, and health care.

Implementation Strategies

4.1.1 Establish a resource and referral system that will provide direct access to all services that impact families.
4.1.2 Conduct a Household Sample Survey of DC residents for needs assessment.
4.1.3 Utilize Census information.
4.2.1 Enhance the provision of early care and education for children in the Foster Care system.
4.2.2 Apply Head Start performance standards for child outcomes.
4.2.3 Provide health care for all children enrolled in early care and education programs.

Critical Success Indicators	Responsible Parties
4.1.4 • **Publish** a comprehensive needs assessment for early care and education in the District. • **Implement** the Universal Early Care and Education program (see 2.22).	4.1.5 • OECD • Deputy Mayor's Office for Children, Youth, and Families • DCPS • DC Library • Answers Please program • DC Office of Policy and Planning
4.2.4 • **Establish** uniform standards for early care and education for ALL children in the District irrespective of service location. • **Establish** standards for health care in early care and education settings. • **Implement** and monitor standards for health care in early care and education settings.	4.2.5 • CFSA, DHS/OECD, DOH, DC Courts • Early Care and Education Providers • Early Care and Education Professional Organizations • Public and Private Health Care Providers

Strategic Goal 4 cont'd

Time Frame

4.1.6
- 12 months to complete the needs assessment after the adoption of the Strategic Plan assessment
- 24 months to implement the Universal Child Care and Education program after the adoption of the Strategic Plan

4.2.6
- 18 months

Data Required	Required Resources
4.1.7 • Inventory of Health and Social Service programs • Household Needs Assessment Survey • Secondary Analysis of data from the Head Start program and other DCPS programs • Secondary Analysis of OECD database • Best Practices	4.1.8 • Funding from OECD • TANF funds • DCPS • OECD Research and Policy Analysts • OECD Staff Liaison
4.2.7 • Baseline and Trend data on children in the Foster Care program • Baseline and Trend data on health care for children in early care and education • Best Practices in other states • Focus group data on parents, providers, and administrators on foster care and health services in early care and education settings	4.2.8 • Funding from OECD and DCPS • OECD Research and Policy Analysts, Staff Liaison • NCCIC

Implementation Strategies

Strategic Goal 5

Advocate on behalf of children and families with regard to all service systems; heighten public awareness of importance of early care and education; and increase professional recognition.

Strategic Objectives

5.1 Parents are aware of what constitutes quality early care and education.
5.2 Parents are educated on their rights, responsibilities, and options regarding early care and education.
5.3 Policy makers to consider the impact their decisions have on children and the family.
5.4 DC residents recognize and support the need for increased early care and education funding.

Implementation Strategies

5.1.1 and 5.2.1 Partner with local print and electronic media on quality early care and education issues.
5.1.2 and 5.2.2 Ensure licensing officials are monitoring the quality of early care and education homes and centers.
5.3.1 Implementation of performance indicators listed below.
5.4.1 Implementation of performance indicators listed below.

Critical Success Indicators	Responsible Parties
5.1.3 and 5.2.3 • **Conduct Annual** Customer Satisfaction Survey and Publish the results. • **Develop** and **Implement** Cooperative agreements with local print and electronic media on disseminating information about early care and education • **Document** increased enrollment in FDCH and licensed centers • **Establish** a citywide quality assurance monitoring protocol. • **Publish** annual reviews of improper practices.	5.1.4 and 5.2.4 • OECD, DOH • Child development homes and centers • Referral agencies • CARUP
5.3.2 • **Develop** a policy framework for documenting the impact of citywide decisions on children and their families. • **Develop** the parameters for children and family-friendly policy.	5.3.3 • OECD, DOH • MACECD • Office of the Deputy Mayor for Chilrdren, Youth, and Families

Strategic Goal 5 cont'd

Critical Success Indicators	Responsible Parties
• **Document** increased number of roundtables, public forums, and testimonies in the District BEFORE policy decisions are made by the Mayor or the City Council. • **Document** an increase in the number of child-friendly policies in the District.	• The Office of the Mayor • The Chair, City Council • The Chair, Health and Human Services Committee of the City Council • CARUP • Private providers and advocates
5.4.2 • **Conduct annual** citywide Consumer Satisfaction Survey and publish the results. • **Conduct** and **publish** the results of the KAP study of District residents regarding early care and education funding. • **Publish** Baseline and Trend data on public/private collaborations and partnerships at ward and city levels. • **Document** and **publish** baseline and trend data on (a) the number of quality community-based and work site early care and education programs/centers (b) early care and education funding and scholarships	5.4.3 • OECD, DOH, DCRA, Fire and Emergency Dept. • MACECD • CARUP • The Business Community (Pro Bono assistance) • Providers

Time Frame

5.1.5 and 5.2.5: 12 months
5.3.4: 12 months
5.4.4: 18 months

Data Required	Required Resources
5.1.6 and 5.2.6 • Establish a central data base for tracking licensed FDCH and centers (Head Start or private) • Review the Customer Satisfaction Survey • Secondary Analysis of complaint data from R&R or licensing	5.1.7and 5.2.7 • OECD Policy Analyst, Staff Liaison, MIS Specialist, Data entry clerk • OECD will fund the consultant activities, surveys, printing, and mailing of reports

Strategic Goal 5 cont'd

Data Required	Required Resources
5.3.5 • Best Practices from other states • Technical publications from national advocacy organizations • Review of the Literature • Identification of valid instruments • Inventory of District policies on children and families • Trend analysis of the District's budget for children and families	5.3.6 OECD will fund the entire activity OECD Policy analyst, Staff Liaison Consultant
5.4.5 • Best Practices • KAP of District residents on Early Care and Education Funding • Pre-and-Post Data on ongoing citywide information dissemination campaigns • Inventory of ANC-level work on Early Care and Education • Secondary Analysis of Data from citywide Consumer Surveys	5.4.6 • OECD to fund the publication of annual reports and mailing, KAP surveys, data analysis, consultants

Implementation Strategies

Strategic Goal 6

Ensure professional development through: training, including GED and mental health; documentation and trainer certification; linking opportunities for training; and eliminating barriers to training for current and future early care and education staff.

Strategic Objectives

6.1 Accessibility and availability of training, i.e., G.E.D., Mental Health, Early Child Development.
6.2 Expand certification of trainers processed through the DC Professional Development Registry.
6.3 Review of Family Child Care Home Providers (FCCHP) regulations and regulations for early care and education centers in the District of Columbia to provide incentives that support training upgrade of early care and education staff.

Implementation Strategies

6.1.1 Training should be provided in Level 1 and Level 2.
6.1.2 The Internet should become a major medium of instruction for the CDA, GED; Distance learning; Self-paced home study; Cluster training; Programs offered by ECLI at UDC; Access to local TV stations and cable; Computer loans.
6.2.1 Update periodically, publish, and distribute, the Directory of Trainers and Training Organizations.
6.2.2 Public Service Announcements (PSAs) through print and electronic media.
6.2.3 Develop train-the-trainers programs.
6.2.4 Expand the Child Care Calendar Hot line.
6.2.5 Establish an Early Care and Education Website and hyperlink to well-known local and national sites.
6.3.1 Include a provision for early care and education programs to provide release time for their staff to attend training.
6.3.2 Include immediate compensation for staff who satisfactorily complete training: GED, CDA, CDS, AA, ESL, BA, MA.

Critical Success Indicators

6.1.3
- **Establish** a minimum training requirement for all cadres of providers and regulators.
- **Document annual** 10% increase in the number of graduates of the training programs: GED, CDA, ESL, AA, BA, and **Masters level.**
- **Establish** an online training program.
- **Document an annual** 10% increase in the number of providers that achieve minimum training requirements.

Responsible Parties

6.1.4
- OECD, UDC, CMHS, DOH, MACECD, DC State Healthy Start Collaboration Project, DCPS (voc.)
- Post-secondary education at DHS, Adult Literacy Collaborative and other providers

Strategic Goal 6 cont'd

Critical Success Indicators	Responsible Parties
6.2.6 • **Review** and **publish, biannually**, the Directory of Trainers and Professional Organizations. • **Increase** the number of certified trainers (individual and organizations) processed through the Registry by 50 percent in 2 years. • **Establish** an Early Care and Education Website. • **Establish** protocol for PSAs (design, implementation, monitoring and evaluation).	6.2.7 • OECD, UDC • MACECD • Early Childhood Collaborative • Interagency Coordination Council for Early Intervention Services (ICC)
6.3.3 • **Establish** a citywide policy that links compensation with professional development. • **Implement** a monitoring and evaluation mechanism for linking compensation with professional development. • **Document** an increase in the proportion of providers that benefit from the program.	6.3.4 • OECD and MACECD Subcommittee on Retention and Compensation • CARUP

Time Frame

6.1.5: 18 months
6.2.8: 12 months
6.3.5: 24 months

Data Required	Required Resources
6.1.6 • Baseline and Trend demographic, socioeconomic, and environmental data on current training programs • Revised OECD Inventory of training programs • Data from the MACECD Data and Needs Assessment Subcommittee • Technical materials from professional organizations such as NAEYC, NARA	6.1.7 • OECD to fund the publication of Annual Report and mailing, consultants • Certified Trainers from the Taking Charge of Change (TOC) Program of UDC

Strategic Goal 6 cont'd

Data Required	Required Resources
6.2.9 • Secondary analysis of data in the Professional Development Registry • Secondary Analysis of calls to the Hotline • Inventory of PSAs by ANC, Ward • Best Practices from other states	6.2.10 • OECD will fund the entire activity • Collaboration with related organizations
6.3.6 • Comparison of existing requirements for FCCHP with the new regulations • Best Practices from other states, especially North Carolina • Review Policy Options for funding	6.3.7 • OECD is funding this activity • Will require District appropriations • Printing and mailing of Annual Reports

The mission, vision, and strategic goals serve as the guide to any city wide early care and education initiative. This guide is also useful in formulating public policies, designing collaborative ventures, mobilizing communities in the District, and stimulating academic discussions and evaluation programs. Individuals and organizations applying for District, Federal and private sector funding will also find the guide, a useful tool for setting parameters and priorities.

The Early Care and Education Strategic Plan is an affirmation of the Mayor's Safe Passages program. This program highlights the need for the urgent government and private sector investments in healthy families, children, youth, and individuals. The Safe Passages program is discussed in greater detail in the next chapter of this document.

DISTRICT OF COLUMBIA CITYWIDE STRATEGIC PLAN

SAFE PASSAGES: HEALTHY FAMILIES, CHILDREN, YOUTH, AND INDIVIDUALS

Mayor Anthony Williams, soon after assuming office, initiated a citywide strategic planning process to set priorities and articulate a vision for the District. A major focus of the strategic planning process is the deliberate involvement of District residents in the design of citywide programs and policies. The Citizen Summit of November 1999 attracted more than 3,000 city residents who spoke clearly and forcefully on a range of issues such as improving the public schools, revitalizing neighborhoods, and assisting families to raise their children in a safe and healthy environment.

The citywide strategic plan is **focusing on five major areas**: Building and sustaining healthy neighborhoods; assuring economic development; making government work; improving democratic practices in the District; and ensuring that families, youth, and individuals are healthy and productive, known as the Safe Passages program.

The Safe Passages program is based on **three overarching principles**:

1. Families are key building blocks of a neighborhood;

2. Strong families create healthy communities where neighbors know and trust each other, and where children grow into healthy and productive adults; and

3. Ultimately, the District will create a pro-family system of integrated services to address the complex challenges faced by District residents.

Prior to the November 1999 Citizens Forum, the first draft of the Citywide Strategic Plan had two major approaches to a pro-family system: the *Investing in Children* Plan and the *Youth and Strengthening Families* Plan.[8] Following feedback from DC residents during the Summit, the Office of the Mayor merged the two plans into a single document, the *Safe Passages: Healthy Families, Children, Youth, and Individuals.*[8] The Action Plan for the Safe Passages program contains twelve goal statements on children, youth, individuals, the elderly, and individuals.

For the purposes of the Early Care and Education Strategic Plan, this document will only reference goals and sections that deal with early care and education and early childhood development.

THE SAFE PASSAGES PROGRAM AS IT RELATES TO THE OECD

SELECTED GOAL AND OBJECTIVES OF THE SAFE PASSAGES PROGRAM

Goal 1: Children are ready for school

Objective 1.1: The DHS Office of Early Childhood Development will increase the number of infant care and early care and education slots for children enrolled in government subsidized early care and education by a minimum of 25 percent.

Objective 1.2: The DHS Office of Early Childhood Development will develop standards for early childhood development programs that support a child's transition into more structured learning.

Objective 1.3: The Office of Early Childhood Development will increase by 50% the number of subsidized early care and education providers that achieve national accreditation standards.

Objective 1.5: The Commission on Mental Health Services, the Office of Early Childhood Development, and the PBS will identify at least 400 infants and toddlers with significant developmental delays through interagency outreach activities, and will provide services coordination, therapeutic, and other early intervention services. Sixty-five percent of these parents will demonstrate the ability to access medical and therapeutic services 30 to 60 days post-service.

Objective 1.7: OECD, DCPS, the Children and Youth Investment Trust, and Catholic Charities will identify and cultivate community partners to support the increased capacity of community-based centers, to serve as teaching/learning centers for parents as first-teachers and caregiver programs in areas of highest need.

Objective 1.8: No fewer than 5 charter schools serving elementary school age children will have secured licenses and be able to apply early care and education subsidies to help sustain their school-age children in the before and after school programs. Each center will have tutoring and educational enrichment, arts, and recreation components consistent with school-age early care and education standards.

Goal 2: Children and youth succeed in school

Objective 2.1: The Children and Youth Investment Partnership Trust Corporation will fund a minimum of 30 new out-of-school time programs at the neighborhood and community-based levels. The academic content of these centers will be aligned with DCPS standards of learning and reform initiatives.

Objective 2.2: The Office of Policy and Evaluation in collaboration with DCPS will establish benchmarks and academic success criteria for children and youth participating in academically-focused, government subsidized (direct and indirect) out-of-school time programs.

Objective 2.3: The Department of Parks and Recreation, in collaboration with DCPS, DCPL, and the CYIPT will adopt out-of-school standards for its educational support programming.

Objective 2.4: The DCPL, in collaboration with DCPS and the DC Public Charter Schools, will increase accessibility to the public library system and improve library services to all middle and junior high school.

Objective 2.5: The DC Commission on the Arts and Humanities will establish criteria that ensures that all grants related to or including out-of-school programming comply with the Department of Juvenile Justice and National Endowment for the Arts Best Practice Models for Arts programs designed for youth-at-risk.

Goal 3: Children and Youth live in healthy, stable, and supportive families and environments

Objective 3.1: Provide 16,400 youth ages 14-24 information to access year-round employment and training opportunities.

Objective 3.2: Provide gainful employment or vocational training leading to gainful employment to 650 youth.

Objective 3.3: Establish the Workforce Investment Board's District Youth Council.

Objective 3.4: Collaborate with DCPS, DC Public Charter School Coalition and the local business community in establishing the Passport-to-Work Internship initiative for 12th grade students who are performing satisfactorily in school.

Objective 3.5: Seventy-five percent or 600 Passport-to-Work interns to have completed a structured work experience.

Objective 3.6: Collaborate with the Children and Youth Investment Trust Corporation and community-based service providers to establish a minimum of five entrepreneurial training opportunities for youth between 14 and 21 years of age.

Objective 3.7: Increase by 10% the number of developmentally disabled youth transitioned from the DCPS who are placed in supported or competitive employment through the Rehabilitation Services Administration.

UPDATE ON THE SHORT TERM OBJECTIVES FOR EARLY CARE AND EDUCATION IN DC

The DC Department of Human Services and the Department of Health jointly developed short term objectives for revamping the early care and education system.[10] The latest update on these objectives cover the period January 2001 through June 2001. This report includes a brief overview of the update.

Objective 1: To adjust Child Care Subsidy Program reimbursement rates to conform more closely to the market rate.

Status: DC raised early care and education rates twice, completed market rate surveys, and established rates for care during non-traditional hours and days.

Action Steps:

- Finalize policies and procedures related to non-traditional early care and education rates. The projected result is the development of a policy manual chapter, with OECD staff as lead persons.

- Develop regulations, policies, and procedures related to rates for children with disabilities. The projected results include a policy manual chapter, report from the Task Force on the issue, and a notice in the District Register. OECD staff persons are the lead technical staff in this effort.

- Develop regulations, policies, and procedures related to a tiered rate system. The projected results include a policy manual chapter, report from the Task Force on the issue, and a notice in the District Register. OECD staff, CARUP, and a consultant are the lead technical persons.

- Develop regulations, policies, and procedures related to a blended Head Start and Early Eare and Education Rate. The projected results include a policy manual chapter, report from the Task Force on the issue, and a notice in the District Register. OECD staff and a consultant are the lead technical persons.

- Develop policies and procedures related to national accreditation programs to be recognized in DC. The projected result is the DC National accreditation tool and policy. OECD staff, MACECD and a consultant are the lead technical persons.

- Conduct 2000 Market Rate Survey (Final report in August 2001). The projected result is a publication of the survey findings and report. CARUP and MACECD are the lead technical organizations.

Objective 2:To publish child development facility licensing regulation.

Status: DC passed legislation authorizing the Mayor to promulgate child development facility regulations. DHS and DOH developed a comparative analysis document using current regulations and national standards. They also established a Regulations Task Force with technical panels. Each of the panels developed a set of draft regulations.

Action Steps:

- Conduct briefing on Draft VI. The projected result is the recommendation report. OECD, DOH personnel, and a consultant are lead technical persons.
- Develop the final regulation draft for community and legal review. The projected result is a notice in the District Register. The DHS and DOH General Counsel offices are the lead technical entities.
- DC Corporation Counsel review. The projected result is the Memorandum of Approval.
- Publish proposed regulations. The projected result is a notice in the District Register. Staff of the DHS and DOH General Counsel offices will take the lead role.
- Publish final regulations. The projected result is a notice in the District Register, with DHS and DOH lawyers as lead persons.

Objective 3:To implement the new parent co-payment and eligibility policies.

Status: DC hired a contractor to assist with the revision of income eligibility criteria and parent co-payments.

Action Steps:

- Develop new eligibility guidelines, policies, and procedures. The projected result is a notice in the District Register. OECD staff are the lead technical persons.
- Revise eligibility manual policies and procedures including revised proof of residency requirements. The projected result is the draft manual. OECD staff are the lead technical persons.
- Develop eligibility training institute. The projected result is the development of a framework for the Institute. OECD staff are the lead technical persons.
- Monitor eligibility determination. The projected result is a report on provider eligibility monitoring. OECD staff are the lead technical persons.
- Develop and implement data entry quality control system. The projected result is a report on monitoring quality control policies and procedures. OECD staff are the lead technical persons.

- Implement new approach to parent co-payments. The projected results include the publication of a notice in the DC Registry and the subsequent issuance of a new policy. The lead technical persons are from OECD and the DHS General Counsel.

- Sponsor consumer education session on new parent co-payment and eligibility policies. The projected result is convening of the session and the issuance of a report. The lead technical persons are from OECD.

- Train OECD and provider staff on new parent co-payment system. The projected result is the completion of training for the relevant staff. The lead technical persons are from OECD.

Objective 4: To finalize the District of Columbia Early Care and Education Quality Improvement Strategic Plan

Status: The draft Early Care and Education Strategic Plan is at final stages of completion. The approved plan should be available by August 2001.

Action Steps:

- Distribute interim Early Care and Education Strategic Plan report. This function completed in February 2001 with CARUP and OECD staffs as key technical persons.

- Review Safe Passages and Strengthening Families strategic plans and performance measures from DHHS Office of Child Care Bureau. Appropriate concepts should be incorporated into the Early Care and Education Strategic Plan. The review of the Safe Passages plan is ongoing. Relevant sections of the plan are incorporated into this document. CARUP and OECD staffs are key technical persons in this effort.

- Sponsor citywide forum to develop action steps and work plan. CARUP organized the forum in March 2001. Draft work plan distributed. This document includes revisions made to the draft work plan. CARUP and OECD staff persons are managing this effort.

- Complete the Strategic Plan. Draft plan was completed in June 2001. CARUP is the lead organization in this effort.

- Forward Plan to DHHS. This will take place in September 2001. OECD is the lead organization.

- Implement and monitor the plan. This activity will be accomplished through progress reports and focus group studies. OECD and the DOH Division of Child and Residents Facilities will be the lead organizations.

- Modify the automated system modules to accommodate:
  - ✓ Blended Head Start and Early Care and Education Services
  - ✓ Children with disability services
  - ✓ Part C infants and toddlers with disabilities services
  - ✓ Tiered reimbursement rates
  - ✓ New eligibility criteria
  - ✓ New parent co-payments.

The projected result of the automation is the development of manuals that are specific to each component of the system and can also allow for integration of data elements. OECD staffs and a consultant are the technical lead persons for this effort.

NEXT STEPS IN THE STRATEGIC PLANNING PROCESS

The top ten early care and education issues, and the draft vision, mission, and goal statements represent important milestones in the planning process.[1, 3, 4, 16] However, the identified early care and education issues and statements reflect the views of selected stakeholders. It is important to conduct a citywide forum to facilitate the review of the draft strategic plan. It is also important for the political leadership in the District to review the draft document. The District's early care and education plan should reflect the major thrust of the Mayor's *Safe Passages Program* and other relevant legislation passed by the City Council.

CARUP and OECD are proposing the following next steps:

- The distribution of this Draft Plan to early care and education stakeholders for review and comments;
- Convening a citywide forum where stakeholders from the public and private sectors will review the vision, mission, and goal statements. During the forum, the participants will also review the strategic objectives, potential strategies, performance indicators, required data elements, responsibility parties, required resources, and time frames.
- The strategic objectives should address the following consensus early care and education themes: Quality of care; affordability; accessibility; care for school age children; community empowerment; family early care and education; professional development and continuing education of care givers; and parental involvement in the design, planning, management, monitoring, and evaluation of early care and education programs;
- After the forum, the draft plan should be refined by a select group of stakeholders. This group should develop an accompanying financial plan;
- The final draft of the strategic plan, especially the strategic objectives and implementation strategies should incorporate relevant sections of the *Short Term Work Plan for Child Care* in DC;
- The final draft of the citywide early care and education strategic plan should be reviewed by the directors of District agencies responsible for early care and education services, business organizations that provide early care and education services, the Mayor, the Deputy Mayor for Children, Youth and Families, and the Human Services Committee of the City Council;
- Finally, the Mayor will introduce the early care and education plan in a special ceremony, and the document will hopefully become the catalyst for a durable public/private partnership in assuring quality early care and education in the District.

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